

Form CPF M 102: Campaign Finance Report

Municipal Form

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Treasurer's signature (in ink

Office of Campaign and Political Finance 2014 JAN 2 File with: City or Town Clerk or Election Commission Please print or type all information, except signatures. Fill in dates: OCTUBER Reporting Period Beginning Ending Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election ☐30 day after election year-end report ☐ dissolution TOM SEDELL COMMITTEE TO ELECT Full Name of Candidate (if applicable) Committee Name IARD ONE CITY OUNCIL Office Sought and District Name of Committee Treasurer WESTWOODS WESTWOOD AVENUE Residential Address Committee Mailing Address 02301 BRUCKTON, MA 02301 MA Tel. No. (optional) Tel. No. (optional) SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Soverelland Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the ctivity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

EOD CANDIDATE D	THE THICK ONLY	

FOR CANDIDATE FILINGS UNLY: (CANDIDATE MUST SIGN BELOW)
Affidavit of Candidate: (check 1 box only)
Candidate with Committee and no activity independent of the committee
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign
finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any
contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.
Candidate without Committee OR Candidate with independent activity filling separate report
I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign
finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the
campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjuly:
1/20/14
Candidate signature (in ink)



SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date Name and Residential Address Received (alphabetical listing required)		Amount			
Received	(alphabetical listing required)			(for contributions of \$200 or mor	
10/25/13	LYMAN WHEELOCK RD, EASTUN	100	UV		
10/25/13	BRUCKTON REPUBLICAN COMM. BRUCKTON, MA.	200		POLITICAL COMMITTEE	
10/29/13	39 CALYMET BR. BRUKTON	200	00		
17/25/13	DINOPOULUS, THOMAS TO BRAEMOUR PD, BROCKTON	100	vo		
10125/13	JOHNSON, GEURGIA II COUNTRY CLUB IN, BRUCKTUN	100	00		
10/25/13	PITTS, ELLEN 11 COLBY ST. BROLKTON	100	00		
10/25/13	SEDELL, TOM 36 WESTWOOD AVE, BROCKTON	700	09	COMMITTEE	
				·. —	
				3	
Line 9: To	otal receipts in excess of \$50 (or listed above)	1,500	00	.b	
Line 10: To	otal receipts \$50 and under* (not listed above)	1,998	60		
Line 11: To	OTAL RECEIPTS IN THE PERIOD	3,498	60	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	ount
10/1/13	CAMBRIDGE OFFSET PRINTING	56 CREVENTON ST. CAMBRINGE, MA	SIGN PRINTING	1,039	48
10/29/13	CAMBRISHE OFFSET PRINTING	STO CREIGHTON ST. CAMBRIDGE, MA	SIEN PRINTING	596	24
10/24/13	HARRY'S WESTEATE PUB	BROCKTUN, MA	FHNDRAISER	300	DE
10 12313	PROSPECT HILL PRINTING	BRICKTON, MA	PR. NTING	632	82
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		7,			
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× , ,					
				e S je	
L		Line 12:	Expenditures over \$50	2,568	60
	· ·		Expenditures \$50 and under*	-	017
F	nter on page 1, line 4		TOTAL EXPENDITURES	3.560	60

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/25/13	TOM SEDELL	36 WESTWOOD AVE. BROCKTON	PAYOFF OF LOAN	700.00
				*
			•	
*				
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	700.00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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